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(650) 849-6666**FACSIMILE TRANSMITTAL****TO MAIL STOP ISSUE FEE**U.S. Patent and Trademark Office
Fax No.: (571) 273-2885
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Subject: Issue Fee Payment
Our File No.: 02860.0721-03000**FROM**Name: Kristin L. Menon
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Phone No.: 650 849 6679
Fax # Verified by: rmw
Pages (incl. this): 4
Date: October 28, 2005**Confirmation Copy to Follow: NO**

Inventors: Shogo YAMAMOTO et al.)

Application No.: 10/774,615)

Filed: February 10, 2004)

Allowed: July 29, 2005)

For: OPTICAL PICKUP LENS,
MOLDED OPTICAL COMPONENT,
HANDLING METHOD, AND MOLD FOR
OPTICAL COMPONENT)

Group Art Unit: 2873

Examiner: David N. SPECTOR

Confirmation No.: 1666

Applicants enclose the following papers:

1. Issue Fee Transmittal in *Duplicate*, with Certificate of Facsimile Transmission and Deposit Account Authorization in the amount of \$1,706.00, (2 pages); and
2. Fee Address for Maintenance Fee Purposes, with Certificate of Facsimile Transmission, (1 page).

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Rebecca M. Whitelock

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OCT 28 2005

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Rebecca M. White (Depositor's name)
[Signature] (Signature)
October 28, 2005 (Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/774,615 | 02/10/2004 | Shogo Yamamoto | 02860.0721-03 | 1666 |

TITLE OF INVENTION: OPTICAL PICKUP LENS, MOLDED OPTICAL COMPONENT, HANDLING METHOD, AND MOLD FOR OPTICAL COMPONENT

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 10/31/2005 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|------------------|----------|----------------|
| SPECTOR, DAVID N | 2873 | 359-811000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Finnegan, Henderson,
Farabow, Garrett
& Dunner LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Konica Minolta Holdings, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Tokyo, Japan

10/31/2005 MAHME2 00000060 060916 10774615
 01 FC:1501 1400.00 DA
 02 FC:1504 300.00 DA
 03 FC:8001 6.00 DA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

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☒ Publication Fee (No small entity discount permitted) (\$300.00)

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Kristin L. Menon

Date

10/28/05

Typed or printed name

Kristin L. Menon

Registration No. 56,869

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